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(Depositor's name) (Signature) (Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	T NO. CONFIRMATION NO.	
09/817,058	03/27/2001	Hitoshi Tada	401142	9201	

TITLE OF INVENTION: OPTICAL MODULATOR AND PHOTONIC SEMICONDUCTOR DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	ИО	\$1330		\$300	\$1630	01/14/2004
EXAM	IINER	ART UN	Т	CLASS-SUBCLASS]	
ARTMAN,	THOMAS R	2882		385-131000		4
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			names of	nting on the patent front page, up to 3 registered patent at R, alternatively, (2) the name	ttorneys or 1 LEY	DIG, VOIT &
Address form PTO/SB/122) attached.		firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent			YER, LID.	
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.		attorneys or agents. If no name is listed, no name will be printed.				

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

MITSUBISHI DENKI KABUSHIKI KAISHA

TOKYO, JAPAN

Please check the appropriate assignee category or categorie	s (will not be printed on the patent);	individual	a corporation or other pr	rivate group entity	☐ government
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):				
X Issue Fee	☐ A check in the amo	ount of the fee(s)	s enclosed.		
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Advance Order - # of Copies10	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 12-1216 (enclose an extra copy of this form).				
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